

DESCRIPTION	INITIALS	ID NO.	DATE
FEE DETERMINATION	90	60195	4/5/60
O.I.P.E. CLASSIFIER	EH		
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓	Rejected	N	Non-elected
□	Allowed	I	Interference
— (Through numeral)	Canceled	A	Appeal
⋮	Restricted	O	Objected

Claim	Final	Original	Date
1		1-6/29/60	
2		1-8/13/60	
3		1-8/13/60	
4		1-8/13/60	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here